

Certificate International Profile BSc Midwifery An Innovative Concept to Promote Intercultural Competence

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Background

Globalization, mobility and migration are becoming increasingly important. Around 25% of Switzerland's population and 33% of its health-care force are foreign nationals. To comply with midwifery philosophy and frameworks, midwives need strong intercultural competences to guarantee quality care in current and future health-care systems.

Aims

The international coordinators of ZHAW (Tamas et al. 2017) developed the *Certificate International Profile* (CIP). The CIP aims to deepen and broaden the intercultural components already included in the curricula and allows future midwives to:

- Work in a culturally diverse and changing health care system
- Actively participate in innovative change processes nationally and internationally
- Expand their horizon and their understanding of different cultures
- Know international developments in the professional field and collaborate with students and professionals from other countries

Methods

Each CIP student is responsible for her portfolio which includes compulsory and optional components. They can be adapted by the students according to their individual needs and interests. Students need to validate criteria in the following areas:

- International engagements
- Intercultural competences
- Languages

Content

The main aspects of the CIP are knowledge transfer of interculturality and diversity, the development of one's own values and norms, intercultural exchange, the reflection of intercultural experiences and foreign languages knowledge.

Results

This optional certificate is currently implemented for the first time at the Institute of Midwifery, therefore has not yet been evaluated.

Conclusion

For midwives, globalization, migration and diversity are central aspects of today's and tomorrow's working environment. The CIP is an innovative concept offering motivated student midwives ready to go the extra mile additional intercultural competences.



Tamas et al. 2017

Main References

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